STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH BUREAU OF REGULATORY SERVICES

Re: Lynn Williams, R.N.

Petition No. 2000-1004-010-064

License No.: E54458

VOLUNTARY SURRENDER

Lynn Williams, being duly sworn, deposes and says:

- 1. I am over the age of majority and understand the obligations of an oath.
- 2. I make this affidavit on the basis of personal knowledge.
- 3. I am licensed by the Department of Public Health (hereinafter "the Department") to practice registered nursing. I presently hold license number E54458.
- 4. I hereby voluntarily surrender my license to practice registered nursing in the State of Connecticut.
- 5. I understand and agree that if I seek a new license or to reinstate my license at any time in the future, the allegations contained in Petition Number 2000-1004-010-064 shall be deemed true. I further understand that any such application must be made to the Connecticut State Board of Examiners for Nursing (hereinafter "the Board") and the Department, and that the Board shall be a signatory to any order reinstating my license or granting me a new license.
- 6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request.
- 7. I understand and agree that this affidavit and the case file in Petition Number 2000-1004-010-064 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.
- 8. I understand that this surrender of my license is a reportable event and is public information.
- 9. I understand that, upon execution of this document by the Department, the Department will present this document to the Board and will move to withdraw the Statement of Charges in Petition No. 2000-1004-010-064. I understand that this document is not effective unless and until the Department has executed it, and the Board either grants the Department's Motion to Withdraw or the charges are dismissed.

10. I un	derstand that I have the right to consult with an	attorney prior to signing this affidavit.
		Lynn Williams
Subscribe	d and sworn to before me this 7 th	_day of _October 2000.
		Notary Public
		Commissioner of Superior Court
	My	Commissioner of Superior Court Commissioner of Superior 01-31-2002
Accepted:	Latitude of Salvania	Elan Sec
•	Kathleen Zarrella, Director	Dåte
	Division of Health/Systems Regulation	